

| | | | | | | |
|--|---|--|--|--------------------------------------|--|-----------------------------------|
| 1. Incident Name: | | Purpose: ICS Form 213RR-EPA is used by all incident personnel to request tactical and non-tactical resources (supplies, equipment, personnel and services). Instructions on back page. | | | Resource Request Message ICS Form 213RR-EPA | |
| 2. Date/Time Prepared | | A. Logistics Resource Request Number (assigned by Logistics Section): | | | (Pre-printed # here) | |
| 3. ORDER 3a. Funding Source (if known): <input type="checkbox"/> FEMA MA# _____ <input type="checkbox"/> CERCLA <input type="checkbox"/> OPA <input type="checkbox"/> Other _____ 3b. TO # or TDD _____ | | | | | | |
| Note: One 213RR per funding source | | | | | | |
| Requester | 3c. Qty | 3d. Unit | 3e. Detailed description of resource requested (supplies, equipment, personnel, services) and, if applicable, staple attachments for purpose/use, diagrams, and other information. (Ops indicate if request is TACTICAL) | 3f. Requested Reporting | | 3g. (RESL) Tactical? Y/N |
| | | | | Location: | Date/ Time: | 3h. LSC/FSC |
| | 2 | 1 | Clip on dome light to illuminate SIT display | ICP Corpus Christi SIT Display | 9/4/17 | |
| | | | | | | Vendor or Agency: |
| | | | | | | Vendor or PO #: |
| | | | | | | ETA: |
| | | | | | | Cost: |
| | | | | | | Vendor or Agency: |
| | | | | | | Vendor or PO #: |
| | | | | | | ETA: |
| 4. Suggested source(s) of supply if known also Point-of-Contact phone number and suitable substitutes, if known : Any | | | 5. Requester 5a. Requester Position and Signature: (Print Name) Brian Englat A1MAT SITL Bunge | | | |
| CHECK IF THIS REQUEST WAS PLACED WITH START/ERRS | | | 5b. Contact Method/Number(s): 6. Section Chief/Command Staff Approval: _____ Date/Time: 9/4/17 0545 | | | |
| Logistics | 7. LSC Notes: PROCURED LOCALLY THROUGH CONTRACTOR - CLOSED | | | | | |
| | 8. Logistics Section Signature: _____ Date/Time: _____ | | | | | |
| | 9. SPUL, Property Management Officer or Property Accountable Officer/Designee Signature: _____ Date/Time: _____ | | | | | |
| | Was property available from excess? (Check EMP Equipment, IFMS and/or GSA) <input type="checkbox"/> Yes, reassign resources to incident. <input type="checkbox"/> No, then submit ICS Form 213 RR-EPA to EOC or FSC for processing. | | | | | |
| 10. Order placed by (check box): <input type="checkbox"/> SPUL <input type="checkbox"/> PROC <input type="checkbox"/> OTHER _____ DATE ORDER WAS PLACED _____ DATE RECEIVED _____ | | | | | | |
| Finance | 11. Reply/Comments from Finance: | | | | | |
| | 12. Finance Section Signature: _____ Date/Time: _____ | | | | | |
| Planning | 13. RESL - Note availability of each resource request: | | | | | |
| | 14. RESL Review/Signature: _____ Date/Time: _____ | | | | | |
| Full instructions and routing information on back page. Requester fills all white areas, as well as block 4, if suggested source is known. Requester obtains appropriate Section Chief or Command Staff approval in block 6. Requester submits to Logistics and keeps Copy 6 (bottom GREEN copy). (Revised 6/2009) | | | | | | |